GREENBERG SPINE
MINIMALLY INVASIVE SPINE SURGERY

UNDERSTAND THE CONDITION - KNOW THE NEXT STEP

Cervical Radiculopathy

Cervical radiculopathy is a pinched nerve in the neck that sends pain, numbness, tingling, or weakness into the shoulder, arm, or hand. A herniated disc or bone spur is a common cause. Many cases improve with non-surgical care; persistent symptoms may warrant targeted treatment.

What you may feel

- Sharp or burning pain from the neck into the shoulder blade, arm, hand, or fingers.
- Numbness, tingling, weakness, or reduced reflexes in the affected arm.

How it is evaluated

- Strength, sensation, reflexes, and focused maneuvers help identify the involved nerve root.
- MRI shows nerve compression; EMG may be used when the diagnosis or nerve function remains uncertain.

How treatment typically progresses

1 Treatment usually starts without surgery

- Physical therapy, medication, activity modification, posture, and ergonomic adjustments are common starting points.
- A cervical epidural injection or selective nerve-root block may be considered for persistent symptoms.

2 When surgery enters the discussion

- Arm symptoms remain substantially limiting despite appropriate non-surgical care.
- The examination and MRI identify matching nerve compression, or weakness is progressing.

Emergency: go now

- Seek emergency evaluation for new bladder or bowel control changes, rapidly worsening weakness affecting walking or hand use, or a sudden severe neurologic change.

Contact the office promptly

- Contact the office for progressive arm or hand weakness, worsening balance or dexterity, fever with neck pain, or severe worsening neck or arm pain.

Reviewed by Marc Greenberg, MD
Fellowship-trained orthopedic spine surgeon - 2026-07-13
Mayo Clinic (MD) · Johns Hopkins (residency) · Brown (fellowship)

greenbergspinemd.com/neck-nerve/

FOR THIS VISIT

Your plan today

Your care team has checked the items below that apply to you. Keep this with you and bring it to your next visit.

Medications started today
- ☐ muscle relaxant ☐ anti-inflammatory (ibuprofen/naproxen) ☐ acetaminophen (Tylenol)
- ☐ gabapentin / pregabalin ☐ steroid taper (Medrol) ☐ duloxetine ☐ other: _____

Imaging ordered
- ☐ MRI ☐ CT ☐ X-ray (flexion/extension) ☐ standing films ☐ CT myelogram
- → scheduling: ☐ you'll schedule ☐ our office / imaging center will call you

Other studies
- ☐ EMG / nerve conduction ☐ DEXA bone density ☐ vascular study (ABI) ☐ labs: _____

Physical therapy & activity
- ☐ PT - convenient location; order sent ahead ☐ home exercise program
- ☐ activity restrictions: _____ ☐ assistive device (cane/walker) ☐ TENS unit

Bracing
- ☐ none needed ☐ lumbar (LSO) ☐ cervical collar ☐ as directed: _____

Injection
- ☐ Ordered - referral to a pain-management specialist → ☐ they will call you ☐ you will call them

Surgery
- ☐ To be scheduled - our surgical scheduler will call you. If you haven't heard within 5 business days, call (260) 484-1400.

Before surgery clearance & prep
- clearance: ☐ primary care ☐ cardiology ☐ neurology ☐ pre-op labs ☐ smoking cessation
- ☐ stop blood thinners as directed

Referrals
- ☐ Bone Health Clinic (osteoporosis) ☐ weight / nutrition ☐ pain management (medication)
- ☐ other: _____

Work / activity status
- ☐ work / school note ☐ off work until _____ ☐ modified duty ☐ FMLA / disability forms

Follow-up
- in _____ weeks ☐ after your MRI / injection / EMG ☐ as needed

Notes & questions for your next visit

_____

_____

QUESTIONS OR NEW SYMPTOMS
Call us

Office · (260) 484-1400 · Scheduling · (260) 484-1400 · After hours · (260) 484-1400

Patient education - not a substitute for your surgeon's instructions
HANDOUT CERVICAL-RADICULOPATHY - VERSION 1.0.0